

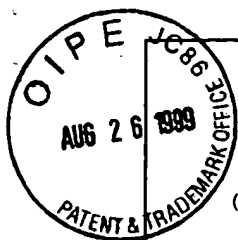
Please type a plus sign (+) inside this box

PTO/SB/21 (12-97)

Approved for use through 9/30/00. OMB 0651-0031

Patent and Trademark Office: U.S. Department of Commerce

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TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

Application Number	08/894,824	
Filing Date	August 29, 1997	
First Named Inventor	Robert Friebe, et al.	
Group Art Unit	1712	
Examiner Name	M. Moore	
Total Number of Pages in This Submission	Attorney Docket Number	G.E. Bayer 9930.1-WCG

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Petition Routing Slip(PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> To convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Terminal Disclaimer	
	<input type="checkbox"/> Small Entity Statement	
	<input type="checkbox"/> Request for Refund	

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

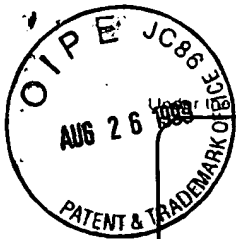
Firm or Individual name	William C. Gerstenzang Spring Kramer Schaefer & Briscoe
Signature	<i>William C. Gerstenzang</i> Reg. No. 27,552
Date	August 23, 1999

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to : Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: August 23, 1999

Typed or printed name	William C. Gerstenzang		
Signature	<i>William C. Gerstenzang</i>	Date	August 23, 1999

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FEE TRANSMITTAL

Note: Effective October 1, 1997.
Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 110

Complete If Known

Application Number	08/894,824
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METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
- Deposit Account Number: 19-3869
- Deposit Account Name: SPRUNG KRAMER SCHAEFER & BRISCOE
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

2. ☐ Payment Enclosed:
- ☐ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 790	201 395	Utility filing fee	
106 330	206 165	Design filing fee	
107 540	207 270	Plant filing fee	
108 790	208 395	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$)

2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
-20 =	X		
Independent Claims - 3 =	X		
Multiple Dependent Claims	X		

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 22	203 11	Claims in excess of 20
102 82	202 41	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim
109 82	209 41	Reissue independent claims over original patent
110 22	210 11	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	110
116 400	216 200	Extension for reply within second month	
117 950	217 475	Extension for reply within third month	
118 1,510	218 755	Extension for reply within fourth month	
128 2,060	228 1,030	Extension for reply within fifth month	
119 310	219 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,320	241 660	Petition to revive - unintentional	
142 1,320	242 660	Utility issue fee (or reissue)	
143 450	243 225	Design issue fee	
144 670	244 335	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 790	246 395	Filing a submission after final rejection (37 CFR 1.129(a))	
149 790	249 395	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify) _____

Other fee (specify) _____

Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110

SUBMITTED BY

Typed or Printed Name: William C. Gerstenzang

Signature: *William C. Gerstenzang*

Date: 8/23/99

Complete (if applicable)

Reg. Number: 27,522

Deposit Account User ID

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